PART B - FEE(S) TRANSMITTAL

and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

Marci Santillanes

OCI 8.3 500g

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, sevence orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, toust have its own certificate of mailing or transmission.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any charge of address)

7590 10/06/2006

HEWLETT-PACKARD COMPANY Intellectual Property Administration

P.O Box 272400

01 FC:1501

02 FC:1504

206 13:30

Fort Collins, CO 80527-2400 10/24/2006 RMEBRAH1 00000023 082025 10015912 1400.00 DA

300.00 DA APPLICATION NO.

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO. 10017897-1

mari Aantilla

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being factimite transmitted to the USPTO (371) 273-2885, on the date indicated below.

3-06

10/015.912

FILING DATE 10/30/2001

Memphis 2hihong Yin

CONFIRMATION NO. 5841

(Signature)

(Date)

TITLE OF INVENTION: DISPLAY DEVICE POWER SAVINGS

APPLN, TYPE	SMALL ENTITY	issue fee dué	FUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	ИО	\$1400	\$300	\$0	\$1700	01/08/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
WU, XIAO MIN 2629		345-211000				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.763). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON						
(A) NAME OF ASSI	GNEE Hewlett-Packard Develop		Houston, Texas	otent. If an ussignee is it assignment. Y and STATE OR COUNT	rry)	
4a. The following fee(s) are submitted: 4b. Advance Order • # of Copies			tb. Psymont of Fee(s): (Please first reapply any previously paid Izsue (ee shown above) A check is enclosed. Psymont by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2025 (enclose an extra copy of this form).			
NOTE: The Issue Fee at	itus (from status indicate is SMALL ENTITY state and Publication Fee (if rec records of the United St	rus. Sce 37 CFR 1.27.	b. Applicant is no lor	nger claiming SMALL EN	TITY status. See 37 CFR	1,27(g)(2),
Authorized Signature Typed or printed name	Doy	Luber		Date	33,704	6
WICKMINGS ANTHUR 22	JJJ-1476.		ion is required to obtain or 1.1.14. This collection is set y depending upon the indicate the Chief Information Office COMPLETED FORMS Tespond to a collection of in			